

OAHU CANDIDATES-  
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-  
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT  
CANDIDATE COMMITTEE

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Ed Case

(b) Committee Name:

Friends of Ed Case

(c) Mailing Address:

3529 Akaka Place

Honolulu, HI 96822

(d) Phone (Bus)

523-2385

(Res)

988-5394

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

☐ 1st Preliminary Primary

☐ Amended

☐ First

☐ Third

☐ 2nd Preliminary Primary

☐ Short Form

☐ Second

☐ Fourth

☒ Final Primary

☐ Preliminary General

☐ Final Election Period

☐ Supplemental

RECEIVED

REPORTING PERIOD

9/9/00 through 9/23/00

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD <sup>2</sup> TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period <sup>2</sup> .....		3,304.87
2. Cash on Hand at the Beginning of this Reporting Period.....	12,751.23	
3. Total Receipts (From Line 15).....	6,085.00	32,760.00
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	18,836.23	36,064.87
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	796.82	18,025.46
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	18,039.41	18,039.41
7. Total Loans at the Closing of this Reporting Period.....	5,000.00	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	-	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	5,000.00	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	13,039.41	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

LLLL

10/13/00

Candidate Signature

Date

LLLL

10/13/00

Treasurer Signature

Date

<sup>1</sup> Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.

<sup>2</sup> An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

**SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	885.00	14,735.00	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	5,200.00	13,025.00	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	6,085.00	27,760.00	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	-	-	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	-	-	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	-	-	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	6,085.00	27,760.00	12
13. Public Funds and Other Receipts.....	-	-	13
14. Loans.....	-	5,000.00	14
15. Total Receipts (Add Lines 12 through 14).....	6,085.00	32,760.00	15
<b>DISBURSEMENTS</b>			
16. Expenditures.....	796.82	18,025.46	16
17. Loans Repaid or Forgiven.....	-	-	17
18. Unpaid Expenditures Paid or Forgiven.....	-	-	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	796.82	18,025.46	19
20. Unpaid Expenditures.....	-		20
21. Total Disbursements (Add Lines 19 and 20).....	796.82	18,025.46	21

CHECK ONLY ONE BOX  
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE  
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 2

Ed Case / Friends of Ed Case

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/12/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Area Realtors PAC 1136 12th Ave, #220 Honolulu, HI 96816		1,600.00	1,800.00
9/12/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Aloha Airlines Hawaii PAC P.O. Box 30028 Honolulu, HI 96820		200.00	200.00
9/12/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Harold Fukuda 1417-B Alexander Street Honolulu, HI 96822		100.00	200.00
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Island Insurance PAC 1022 Bethel Street Honolulu, HI 96813		500.00	500.00
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Allen Miyahara 3164 Paolua Pl. Honolulu, HI 96822		100.00	150.00
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Medical PAC 1360 So Beretania, 2nd Flr. Honolulu, HI 96814		500.00	750.00

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

3,000.00

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total  
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on  
Schedule B.

CHECK ONLY ONE BOX  
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE  
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 2

Ed Case / Friends of Ed Case

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ABC Hawaii Merit PAC 207A Puuhale Rd, Honolulu, HI 96819		500.00	500.00
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hotel PAC 2250 Kalakava Ave, #404-4 Honolulu, HI 96815		200.00	200.00
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Lensecrafters 8650 Gower's Hill Dr. Cincinnati, OH 45242-4580		500.00	800.00
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Daniel Case 2040 Ahualani Pl. Honolulu, HI 96822	Case Gigel & Lombardi  Attorney	1,000.00	1,000.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

2,200.00

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total  
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

5,200.00

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

*Ed Case / Friends of Ed Case*

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9/14/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Ka Leo O Hawaii 1755 Pope Rd, Bldg 31-D Honolulu, HI 96822</i>	<i>Advertisement</i>	<i>380.00</i>
9/19/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Doug Behrens Design P.O. Box 1674 Honolulu, HI 96806</i>	<i>Graphics &amp; postcard, Ads, brochure</i>	<i>416.82</i>
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....	<i>796.82</i>
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....	<i>796.82</i>

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**LATE CONTRIBUTIONS REPORT  
CANDIDATE COMMITTEE**

The Late Contributions Report is to be used to report all contributions aggregating more than \$500 that are received within the period of fifteen calendar days through four calendar days prior to a primary, special primary, general, or special general election. The report is required to be filed no later than 4:30 p.m., three calendar days prior to the election.

CAMPAIGN SPENDING  
COMMISSION

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

*Ed Case / Friends of Ed Case*

00 SEP 20 PM 2:37

DATE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	OCCUPATION OF EMPLOYER <b>RECEIVED</b>	AMOUNT OF CONTRIBUTION	AGGREGATE CONTRIBUTION
	PURPOSE TO WHICH THE CONTRIBUTION WILL BE APPLIED	OCCUPATION		
a/12/00	HAA PAC 1136 12th Ave, Ste 220 Honolulu, HI 96816		1,600.00	1,800.00
	(general)			
a/19/00	Hawaii Medical PAC 1360 S. Beretania St, 2nd Flr Honolulu, HI 96814		500.00	750.00
	(general)			
a/11/00	Lenscrafters 8650 Governor's Hill Drive Cincinnati, OH 45242-9580		500.00	800.00
	(general)			
a/19/00	Daniel Case 2040 Ahualani Pl. Honolulu, HI 96822	Case Bigelow & Lombardi	1,000.00	1,000.00
	(general)	Attorney		